PAGE 1 / 26

FEC FORM 3Y

REPORT OF RECEIPTS AND DISBURSEMENTS

1 OKW 3X	For Other Than An Aut	horized Committee	Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
Constitutional Cons	servatives		
<u> </u>			
	L 229 C Washington Street		
ADDRESS (number and stree			
Check if different	Suite 115		
than previously reported. (ACC)	Alexandria		VA 22314
2. FEC IDENTIFICATIO	N NUMBER ▼ CI	TY 🛦	STATE ▲ ZIP CODE ▲
C C00620120		S THIS NEW (N) OI	AMENDED (A)
4. TYPE OF REPORT (Choose One)	Report Due On:	20 (M2) May 20 (M	(Non-Election Year Only)
(a) Quarterly Reports:		7 20 (M3) Jun 20 (M	(Non-Election Year Only)
April 15		20 (M4) Jul 20 (M7	7) Oct 20 (M10) Jan 31 (YE)
Quarterly Repo	(c) 12-Day	Primary (12P)	General (12G) Runoff (12R)
Quarterly Repo	Peport (Q2) Report for the:	Convention (12C)	Special (12S)
Quarterly Repo	ort (Q3)	M M / D D	/ YTYTY in the
Year-End Rep	` '	on on	State of
July 31 Mid-Ye Report (Non-e Year Only) (M	lection (d) 30-Day	General (30G)	Runoff (30R) Special (30S)
Termination Re (TER)		on on	in the State of
5. Covering Period	08	through 09	M / 30 / Y Y Y Y Y Y 30 2016
I certify that I have examine	ed this Report and to the best of Satterfield, David, , ,	my knowledge and belief it is	true, correct and complete.
Type or Print Name of Trea			
Signature of Treasurer	Satterfield, David, , ,	[Electronically Filed]	Date 10 / 14 / 2016
NOTE: Submission of false,	erroneous, or incomplete informatio	n may subject the person signin	g this Report to the penalties of 52 U.S.C. § 3010
Office			FEC FORM 3X
Use Only			Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 05/2016) Page 2 Write or Type Committee Name Constitutional Conservatives 80 11 2016 09 30 2016 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 0.00 January 1, 2016 (b) Cash on Hand at 7763.18 Beginning of Reporting Period..... 134000.00 195000.00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 195000.00 141763.18 6(a) and 6(c) for Column B)..... 123732.95 176969.77 7. Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 18030.23 18030.23 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 122137.50 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

C_{0}	netiti	ıtional	Conser	Paviter
-c	บาอแน	ılıvılal	COUSEL	งสแงษร

port Covering the Period: From: 08	11 2016 To	
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
(i) Itemized (use Schedule A)	132000.00	193000.00
(ii) Unitemized(iii) TOTAL (add	0.00	0.00
Lines 11(a)(i) and (ii)	132000.00	193000.00
,	0.00	0.00
(such as PACs)	2000.00	2000.00
	134000.00	195000.00
Party Committees	0.00	0.00
All Loans Received	0.00	0.00
oan Repayments Received	0.00	0.00
·	0.00	0.00
	0.00	0.00
	0.00	0.00
	4 4	4 4
·	0.00	0.00
	7 1 1 7 1 1 7 1 1	
	0.00	0.00
(IIOIII Scriedule IIS)	0.00	0.00
b) Levin Funds (from Schedule H5)	0.00	0.00
c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
	Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	Contributions (other than loans) From: a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date			
Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Guidinau Tour to Dute			
(i) Federal Share	0.00	0.00			
(ii) Non-Federal Share	0.00	0.00			
(b) Other Federal Operating	1407.00	42004 50			
Expenditures(c) Total Operating Expenditures	1487.20	13891.52			
(add 21(a)(i), (a)(ii), and (b))▶	1487.20	13891.52			
. Transfers to Affiliated/Other Party Committees	0.00	0.00			
Contributions to Federal Candidates/Committees	4	0.00			
and Other Political Committees Independent Expenditures	0.00	0.00			
(use Schedule E)	122245.75	163078.25			
(52 U.S.C. § 30116(d)) (use Schedule F)	0.00	0.00			
, in the second	200	4 4 4			
Loan Repayments Made	0.00	0.00			
Loans MadeRefunds of Contributions To:	0.00	0.00			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00			
	4 4	4 1 4 1 4			
(b) Political Party Committees(c) Other Political Committees	0.00	0.00			
(such as PACs)	0.00	0.00			
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	200	200			
(aud Lines 20(a), (b), and (c))	0.00	0.00			
Other Disbursements (Including Non-Federal Donations)	0.00	0.00			
· I	0.00	0.00			
Federal Election Activity (52 U.S.C. § 30101(2) (a) Allocated Federal Election Activity	0))				
(from Schedule H6)					
(i) Federal Share	0.00	0.00			
(ii) "Levin" Share	0.00	0.00			
(b) Federal Election Activity Paid Entirely With Federal Funds	200	0.00			
(c) Total Federal Election Activity (add	0.00	0.00			
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00			
Total Disbursements (add Lines 21(c), 22,					
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	123732.95	176969.77			
Total Federal Disbursements	7 7 7	7 7 7			
(subtract Line 21(a)(ii) and Line 30(a)(ii)					
from Line 31)	123732.95	176969.77			

34. Total Contribution Refunds

35. Net Contributions (other than loans)

37. Offsets to Operating Expenditures

38. Net Operating Expenditures

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016) III. Net Contributions/

Operating Expenditures

Page 5 **COLUMN A** COLUMN B **Total This Period** Calendar Year-to-Date 33. Total Contributions (other than loans) 134000.00 195000.00 (from Line 11(d), page 3) 0.00 0.00 (from Line 28(d))..... 195000.00 134000.00 (subtract Line 34 from Line 33) 36. Total Federal Operating Expenditures 1487.20 13891.52 (add Line 21(a)(i) and Line 21(b))▶ 0.00 0.00 (from Line 15, page 3)..... 1487.20 13891.52 (subtract Line 37 from Line 36)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

TOTAL This Period (last page this line number only).....

Use separate schedule(s) for each category of the

FOR LINE NUMBER:						PAGE		6	OF		26
(0	(check only one)										
	×	11a		11b		11c		12			
		13		14		15		16			17

Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Constitutional Conservatives Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Allen Concrete and Masonry Date of Receipt Mailing Address 6301 Shirley St 2016 City State Zip Code Transaction ID: SA11AI.4234 FL Naples 34109 Amount of Each Receipt this Period FEC ID number of contributing C 11000.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General 11000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. BCH Mechanical Inc Date of Receipt Mailing Address 6354 118th Ave N 80 2016 City State Zip Code Transaction ID: SA11AI.4218 FL Largo 33773 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1000.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Bodman, Richard, , , Date of Receipt Mailing Address 3007 Rum Row 11 2016 City State Zip Code Transaction ID: SA11AI.4216 FL **Naples** 34102 Amount of Each Receipt this Period FEC ID number of contributing C 20000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) VMS Group Venture Capital Receipt For: Aggregate Year-to-Date ▼ Primary General 20000.00 Other (specify) 32000.00 SUBTOTAL of Receipts This Page (optional).....

SCHEDULE A (FEC Form 3X)

Use separate schedule(s)

F	FOR LINE NUMBER:							7	OF		26
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		13		14		15		16	;		17

ITEMIZED RECEIPTS for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Constitutional Conservatives Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Icarus Capital LLC Date of Receipt Mailing Address 19 NE 50th St 16 2016 City Zip Code State Transaction ID: SA11AI.4228 Oklahoma City OK 73105 Amount of Each Receipt this Period FEC ID number of contributing C 10000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General 10000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Kelly, Jack, , , Date of Receipt Mailing Address 3645 Kanawha St NW 2016 City State Zip Code Transaction ID: SA11AI.4220 DC Washington 20015 Amount of Each Receipt this Period FEC ID number of contributing 10000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) McPherson Group, LLP Founding Partner Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 10000.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Moore, Donna, , , Date of Receipt Mailing Address 8976 Crooked Stick Ct 12 2016 City State Zip Code Transaction ID: SA11AI.4222 FL **Naples** 34113 Amount of Each Receipt this Period FEC ID number of contributing C 25000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Homemaker Homemaker Receipt For: Aggregate Year-to-Date ▼ Primary General 25000.00 Other (specify) 45000.00 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

TOTAL This Period (last page this line number only).....

Use separate schedule(s) for each category of the Detailed Summary Page

						PAGE		8	OF		26
(check only one)											
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		13		14		15		16	;		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Constitutional Conservatives Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Neira, Linda, , , Date of Receipt Mailing Address 613 Sturtz Cir 2016 12 City Zip Code State Transaction ID: SA11AI.4224 OK Norman 73072 Amount of Each Receipt this Period FEC ID number of contributing C 10000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **Equipment Preference Inc** Sales Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 10000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Page Mechanical Group Inc Date of Receipt Mailing Address 4611 Cummins Court 80 2016 City State Zip Code Transaction ID: SA11AI.4236 FL Fort Myers 33905 Amount of Each Receipt this Period FEC ID number of contributing 10000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 10000.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Storm Smart Building Systems Inc. Date of Receipt Mailing Address 6182 Idlewild St 16 2016 City State Zip Code Transaction ID: SA11AI.4230 FL Fort Myers 33966 Amount of Each Receipt this Period FEC ID number of contributing C 5000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) 25000.00 SUBTOTAL of Receipts This Page (optional).....

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

						PAGE		9	OF		26
(check only one)											
	X	11a		11b		11c		12			
		13		14		15		16	;		17

		ny person for the purpose of soliciting contributions nittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Constitutional Conservatives		
Full Name of Individual (Last, First, Middle In Wayne Wiles Floorcoverings Inc Mailing Address 7851 Supply Dr City Fort Myers FEC ID number of contributing federal political committee. Name of Employer (for Individual) Receipt For: Primary General Other (specify)	State Zip Code FL 33912 C Occupation (for Individual) Aggregate Year-to-Date 5000.00	Date of Receipt 08 18 2016 Transaction ID: SA11AI.4232 Amount of Each Receipt this Period 5000.00 Memo Item
Full Name of Individual (Last, First, Middle In Webb, Mike, , , Mailing Address 4008 Putter PI City Muskogee FEC ID number of contributing federal political committee. Name of Employer (for Individual) Manhattan Road and Bridge Receipt For: Primary General Other (specify)	State Zip Code OK 74403 C Occupation (for Individual) President Aggregate Year-to-Date ▼ 25000.00	Date of Receipt 08 12 2016 Transaction ID: SA11AI.4226 Amount of Each Receipt this Period 25000.00 Memo Item
Full Name of Individual (Last, First, Middle Ir Mailing Address City FEC ID number of contributing federal political committee. Name of Employer (for Individual) Receipt For: Primary General Other (specify)	State Zip Code C Occupation (for Individual) Aggregate Year-to-Date	Amount of Each Receipt this Period Memo Item
SUBTOTAL of Receipts This Page (optional)		30000.00
TOTAL This Period (last page this line number	r only)	▶ 132000.00

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SCHEDULE A (F ITEMIZED RECEIF	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 OF 26 (check only one) 11a					
			erson for the purpose of soliciting contributions to solicit contributions from such committee.					
NAME OF COMMITTEE Constitutional C	, ,							
Full Name of Individual A. GREAT AMERICAN	(Last, First, Middle Initial) or Fu FUND	II Organization Name	Date of Receipt					
Mailing Address PO BC	X 83142		09 07 2016					
City GAITHERSBURG	State MD	Zip Code 20883	Transaction ID : SA11C.4239 Amount of Each Receipt this Period					
FEC ID number of cont federal political committee	ŭ	C00432104	2000.00					
Name of Employer (for	Individual)	Occupation (for Individual)	Memo Item					
Receipt For: Primary Other (specify) ▼	General	ate Year-to-Date ▼ 2000.00						
В	(Last, First, Middle Initial) or Fu	II Organization Name	Date of Receipt					
Mailing Address			M M / D D / Y Y Y Y					
City	State	Zip Code	Amount of Each Receipt this Period					
FEC ID number of cont federal political committee	ŭ							
Name of Employer (for	Individual)	Occupation (for Individual)	Memo Item					
Receipt For: Primary Other (specify) ▼	General	ate Year-to-Date ▼						
Full Name of Individual C.	(Last, First, Middle Initial) or Fu	Il Organization Name	Date of Receipt					
Mailing Address			M = M / D = D / Y = Y = Y					
City	State	Zip Code	Amount of Each Receipt this Period					
FEC ID number of cont federal political committee	S -							
Name of Employer (for	Individual)	Occupation (for Individual)	Memo Item					
Receipt For: Primary Other (specify)	General	ate Year-to-Date ▼						
SUBTOTAL of Receipts T	his Page (optional)		2000.00					

TOTAL This Period (last page this line number only).....

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ackslash	NAME OF COMMITTEE (In Full)												
$ \; angle$	Constitutional Conservatives												
\angle													
Δ	Full Name (Last, First, Middle Initial)			Data of Dishursoment									
Λ.	Anedot					Date of Disbursement							
	Mailing Address P.O. Box 84314					08 31 2016							
		_	T										
	City Baton Rouge	State LA	Zip Code 70884			FEC Id	entifica	tion I	Numb	er			
	Purpose of Disbursement		70004			С			-				
	Credit Card Processing Fees			1			nsacti	on IF) - SB	21 B	12/11		
	Candidate Name			Categor	y/						nt this P	eriod	
	06			Туре				-	-	_	1210.20		
	Office Sought: House Disburser Senate	nent For: Primary	General				-	_	-		1210.20	,	
	President	Other (spec											
	State: District:	отпо. (оро	o <i>y</i> , ∀			Me	mo Ite	m					
	Full Name (Last, First, Middle Initial)												
В.	BB&T				Date of	Disbu	rsem	ent					
	A 32 A 11					M M / D D / Y Y Y Y							
	Mailing Address 300 S Washington Street					09	1 -	21	1 1	2	2016		
	City	State Zip Code				EEC Id	ontifica	tion I	Numb	or			
	Alexandria	VA		FEC Identification Number									
	Purpose of Disbursement Bank Fee	Category/ Type				Transaction ID : SB21B.4243 Amount of Each Disbursement this Period							
	Candidate Name												
					y/	Amoun	of Ea	cn D	isburs	emer	it this P	eriod	
	Office Sought: House Disburser									_	180.00	ם [
	Senate	Primary	General										
	President	Other (spec	cify)			Memo Item							
_	State: District:												
C.	Full Name (Last, First, Middle Initial)					Date of	Disbu	rsem	ent				
						M = M	/ [) D		Υ	YY	Υ	
	Mailing Address						J L		IJ				
	City	State	Zip Code										
	\(\frac{1}{2}\)	Jiaio	_ip code			FEC Id	entifica	tion I	Numb	er			
	Purpose of Disbursement				\neg	С							
							_	_					
	Candidate Name			Categor	y/	Amount	t of Ea	ch Di	isburs	emer	nt this P	eriod	
	Office Sought: House Disburser	nent For		Туре									
	Senate	Primary	General				-	-	-		740		
	President	Other (spec	cify) 🔻			Ma	mo Ite	m					
	State: District:					L IVIE	o itel						
							-		-		1200.0		
S	UBTOTAL of Disbursements This Page (optional)				•			_			1390.2	U	
_	OTAL This Period (last page this line number only)										1390.2	0	
	(was page and into number only)						4 9						

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 12 OF
FOR LINE NUMBER:
(check only one)

IBER:) 9 **x** 10

NAME OF COMMITTEE (In Full) Constitutional Conservatives									
A. Full Name (Last, First, Middle Initial) of Debtor Dentons US LLP	or Creditor		Nature of Debt (Purpose): Legal Services						
Mailing Address 1301 K Street NW Suite 600 East Tower									
City Washington	State DC	Zip Code 20005							
Outstanding Balance Beginning This Period			Transaction ID : SD10.4261						
0.00 Amount Incurred This Period	Payr	ment This Period	Outstanding Balance at Close of This Period						
17500.00		0.00	17500.00						
, , , , , , , , , , , , , , , , , , , ,	B. Full Name (Last, First, Middle Initial) of Debtor or Creditor								
Franklin, Caitlin, , ,			Fundraising Consulting						
Mailing Address 107 S West Street Suite 410									
City Alexandria									
Outstanding Balance Beginning This Period	1		Transaction ID : SD10.4263						
0.00	Dove	ment This Deviced	Outstanding Polones at Class of This Paried						
Amount Incurred This Period 5000.00	Payi	nent This Period	Outstanding Balance at Close of This Period 5000.00						
C. Full Name (Last, First, Middle Initial) of Debtor Global Strike	or Creditor		Nature of Debt (Purpose): Media Production						
Mailing Address 224 Daturo Street Suite 401			_						
City West Palm Beach	State FL	Zip Code 33401							
Outstanding Balance Beginning This Period			Transaction ID : SD10.4195						
Amount Incurred This Period	Pavr	ment This Period	Outstanding Balance at Close of This Period						
0.00		0.00	1600.00						
1) SUBTOTALS This Period This Page (optional)		>	24100.00						
2) TOTALS This Period (last page this line number o	nly)	>							
3) TOTAL OUTSTANDING LOANS from Schedule C	B) TOTAL OUTSTANDING LOANS from Schedule C (last page only)								
4) ADD 2) and 3) and carry forward to appropriate lin									

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 13 OF
FOR LINE NUMBER:
(check only one)

9 **X** 10

26

NAME OF COMMITTEE (In Full) Constitutional Conservatives A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Media Production Global Strike Mailing Address 224 Daturo Street Suite 401 State Zip Code West Palm Beach FL 33401 Transaction ID: SD10.4196 Outstanding Balance Beginning This Period 6800.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 6800.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Media Production Global Strike Mailing Address 224 Daturo Street Suite 401 City State Zip Code West Palm Beach 33401 FL Outstanding Balance Beginning This Period Transaction ID: SD10.4197 800.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 800.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Website/Polling Global Strike Mailing Address 224 Daturo Street Suite 401 City State Zip Code West Palm Beach FL 33401 Outstanding Balance Beginning This Period Transaction ID: SD10.4270 0.00 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 0.00 14600.00 14600.00 22200.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE 14 OF FOR LINE NUMBER: (check only one)

26

9 **X** 10 NAME OF COMMITTEE (In Full) Constitutional Conservatives A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Media Production Global Strike Mailing Address 224 Daturo Street Suite 401 State Zip Code West Palm Beach FL 33401 Transaction ID: SD10.4254 Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 6000.00 6000.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Media Production Global Strike Mailing Address 224 Daturo Street Suite 401 City State Zip Code West Palm Beach 33401 FL Outstanding Balance Beginning This Period Transaction ID: SD10.4255 0.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 6000.00 0.00 6000.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Media Placement Global Strike Mailing Address 224 Daturo Street Suite 401 City State Zip Code West Palm Beach FL 33401 Outstanding Balance Beginning This Period Transaction ID: SD10.4256 0.00 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 0.00 1500.00 1500.00 13500.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 15 OF
FOR LINE NUMBER:
(check only one)

9 **X** 10

	ME OF COMMITTEE (In Full) onstitutional Conservatives				
	A. Full Name (Last, First, Middle Initial) of Debtor of Global Strike	Nature of Debt (Purpose): Media Placement			
Ī	Mailing Address 224 Daturo Street Suite 401				
	City West Palm Beach	State FL	Zip Code 33401		
	Outstanding Balance Beginning This Period	Transaction ID : SD10.4257			
	0.00 Amount Incurred This Period	Outstanding Balance at Close of This Period			
	4908.75		ment This Period	4908.75	
	B. Full Name (Last, First, Middle Initial) of Debtor o Global Strike	r Creditor		Nature of Debt (Purpose): Media Placement	
	Mailing Address 224 Daturo Street Suite 401	State	Zip Code		
	City West Palm Beach				
	Outstanding Balance Beginning This Period 0.00	Transaction ID: SD10.4258			
	Amount Incurred This Period	Amount Incurred This Period Payment This Period			
	4908.75	4908.75			
	C. Full Name (Last, First, Middle Initial) of Debtor Global Strike	or Creditor		Nature of Debt (Purpose): Voter Telephone Communication	
Ì	Mailing Address 224 Daturo Street Suite 401				
	City West Palm Beach	State FL	Zip Code 33401		
	Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4259			
	Amount Incurred This Period	Outstanding Balance at Close of This Period			
	2500.00		0.00	2500.00	
1)	SUBTOTALS This Period This Page (optional)			12317.50	
2)	TOTALS This Period (last page this line number o	nly)			
3)	TOTAL OUTSTANDING LOANS from Schedule C	(last page o	nly) ▶		
4)	ADD 2) and 3) and carry forward to appropriate lin	ne of Summa	ary Page (last page only)		

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 16 OF
FOR LINE NUMBER:
(check only one)

9 **X** 10

			11 11			
NAME OF COMMITTEE (In Full) Constitutional Conservatives						
A. Full Name (Last, First, Middle Initial) of Deb	Nature of Debt (Purpose): Voter Telephone Communication					
Mailing Address 224 Daturo Street Suite 401						
City	State	Zip Code				
West Palm Beach	FL	33401				
Outstanding Balance Beginning This Period			Transaction ID : SD10.4260			
0.00						
Amount Incurred This Period	Pay	yment This Period	Outstanding Balance at Close of This Period			
2500.00	7	0.00	2500.00			
B. Full Name (Last, First, Middle Initial) of Debt	or or Creditor		Nature of Debt (Purpose):			
Huckaby Davis Lisker	or or editor		FEC Compliance and Accounting			
Mailing Address 228 S Washington Street						
Suite 115 City	State	Zip Code				
Alexandria	VA	22314				
Outstanding Balance Beginning This Period	Outstanding Balance Beginning This Period					
			Transaction ID : SD10.4265			
	0.00					
Amount Incurred This Period	Amount Incurred This Period Payment This Period 2520.00 0.00					
2520.00						
C. Full Name (Last, First, Middle Initial) of Dek The Herald Group	otor or Creditor		Nature of Debt (Purpose): Media Placement			
Mailing Address 1800 M Street NW						
3 3 3 1800 W Street NW						
City Washington	State DC	Zip Code 20036				
Outstanding Balance Beginning This Period			Transaction ID : SD10.4198			
			Transaction id : 5010.4196			
5000.00						
Amount Incurred This Period	Pay	yment This Period	Outstanding Balance at Close of This Period			
0.00		0.00	5000.00			
4) CURTOTALS This Deviced This Deeps (entires)			10020.00			
1) SUBTOTALS This Period This Page (optional)			7 7 35 55 55			
2) TOTALS This Period (last page this line numb	er only)	······				
3) TOTAL OUTSTANDING LOANS from Schedul	e C (last page o	only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶						

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 17 OF
FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full) Constitutional Conservatives A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Media Placement The Herald Group Mailing Address 1800 M Street NW State Zip Code Washington DC 20036 Transaction ID: SD10.4251 Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 15000.00 15000.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Media Placement The Herald Group Mailing Address 1800 M Street NW City State Zip Code Washington 20036 Outstanding Balance Beginning This Period Transaction ID: SD10.4252 0.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 15000.00 0.00 15000.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Media Placement The Herald Group Mailing Address 1800 M Street NW City State Zip Code Washington DC 20036 Outstanding Balance Beginning This Period Transaction ID: SD10.4253 0.00 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 0.00 5000.00 5000.00 35000.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 18 OF
FOR LINE NUMBER:
(check only one)

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	X	10

NAME OF COMMITTEE (In Full) Constitutional Conservatives							
A. Full Name (Last, First, Middle Initial) of Debtor The Herald Group	Nature of Debt (Purpose): Digital Strategy Consulting						
Mailing Address 1800 M Street NW	Mailing Address 1800 M Street NW						
City Washington							
Outstanding Balance Beginning This Period	0.00						
5000.00	ra:	yment This Period 0.00	Outstanding Balance at Close of This Period 5000.00				
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Nature of Debt (Purpose):				
Mailing Address							
City	State	Zip Code					
Outstanding Balance Beginning This Period Amount Incurred This Period	Amount Incurred This Period Payment This Period						
C. Full Name (Last, First, Middle Initial) of Debtor	C. Full Name (Last, First, Middle Initial) of Debtor or Creditor						
Mailing Address							
City	State	Zip Code					
Outstanding Balance Beginning This Period Amount Incurred This Period			Outstanding Balance at Close of This Period				
1) SUBTOTALS This Period This Page (optional)			5000.00				
2) TOTALS This Period (last page this line number	only))	122137.50				
3) TOTAL OUTSTANDING LOANS from Schedule C	C (last page o	nly)	0.00				
4) ADD 2) and 3) and carry forward to appropriate I	122137.50						

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

TEMIZED INDEPENDENT EXPENDITURES			PAGE 19 OF 26 FOR LINE 24 OF FORM 3X				
NAME OF COMMITTEE (In Full)							
Constitutional Conservatives			FEC IDENTIFICATION NUMBER ▼ C C00620120				
			O stage 20				
Check if 24-hour report 48-hour report	New repo	ort Amends repor	t filed on M M / D D / Y Y Y Y				
Full Name of Payee		☐ Memo I	tem Date of Public Distribution/Dissemination				
Global Striké			08 / 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Mailing Address 224 Daturo Street			Amount				
Suite 401	Ctoto	Zin Codo	62620.00				
City	State FL	Zip Code 33401	Transaction ID : SE.4168				
West Palm Beach	ΓL	33401	Date of Disbursement or Obligation				
Purpose of Expenditure Media Placement		Category/ Type 004	08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Name of Federal Candidate:		Support	Office Sought: House District: 19				
GOSS, CHAUNCEY, P, ,		M Oppose	President Senate State: FL				
Calendar Year-To-Date		447050 50	Disbursement For: 🗶 Primary General				
Per Election for Office Sought	7-1-1-7-	147652.50	2016				
Full Name of Payee		X Memo I	tem Date of Public Distribution/Dissemination				
Global Strike			08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Mailing Address 224 Daturo Street			00 10 2010				
Suite 401			Amount				
City	State	Zip Code	6000.00				
West Palm Beach	FL	33401	Transaction ID : SE.4288 Date of Disbursement or Obligation				
Purpose of Expenditure Media Production	•	Category/	M M / D D / Y Y Y Y				
Media Floduction		Type 004	08 15 2016				
Name of Federal Candidate:		Support	Office Sought: House District: 19				
GOSS, CHAUNCEY, P, ,		x Oppose	President Senate State: FL				
Calendar Year-To-Date		153652.50	Disbursement For: X Primary General				
Per Election for Office Sought	77-	100002.00	2016 Other (specify) ▶				
(a) SUBTOTAL of Itemized Independent Expenditures			62620.00				
(a) SUBTOTAL of Unitemized Independent Expenditur	es		>				
(a) TOTAL Independent Expenditures							
(a) TOTAL independent Expenditures							
Under penalty of perjury I certify that the independe	nt expenditures	reported herein were	not made in cooperation, consultation, or concert				
with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized						
Satterfield, David, , ,	Electronically Fil	led1	Mam / Dad / Yayayay				
Signature	cc Smeany I'll	Date	10 14 2016				

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

TEMIZED INDEPENDENT EXPENDITURES				PAGE 20 OF 26 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Constitutional Conservatives				C C00620120
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M M / D D / Y Y Y Y
Full Name of Payee Global Strike		X Memo	Item Da	ate of Public Distribution/Dissemination
Mailing Address 224 Pature Street		08 15 2016		
224 Daturo Street Suite 401	Aı	mount		
City	State	Zip Code		6000.00
West Palm Beach	FL	33401		ransaction ID : SE.4297 ate of Disbursement or Obligation
Purpose of Expenditure Media Production		Category/ Type 004	4	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office So	ought: 🗶 House District: 19
Bongino, Daniel, , ,		x Oppose		esident Senate State: FL
Calendar Year-To-Date Per Election for Office Sought		164652.50	Disburse	ment For: X Primary General
Tot Election for Office Gought	7 7			Other (specify) ▶
Full Name of Payee Global Strike		☐ Memo	Item Da	ate of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 224 Daturo Street				08 22 2010
Suite 401			Aı	mount
City	State	Zip Code		30000.00
West Palm Beach	FL	33401		ransaction ID : SE.4202 ate of Disbursement or Obligation
Purpose of Expenditure Media Placement		Category/ Type 004		M 08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office So	ought: 🗶 House District:19
GOSS, CHAUNCEY, P, ,		x Oppose	Pre	esident Senate State: FL
Calendar Year-To-Date Per Election for Office Sought	4 1 1 4	194652.50	Disburse 2016	ment For: Primary General Other (specify) ▶
	,			
(a) SUBTOTAL of Itemized Independent Expenditures			[30000.00
(-,				
(a) SUBTOTAL of Unitemized Independent Expenditure	es			
(a) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized			
Satterfield, David, , ,	Electronically Fil	led1	M = M	/ D D / Y Y Y Y Y
Signature	incumy 1 th	_ Date	e 10	14 2016

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

TEMIZED INDEPENDENT EXPENDITURES			PAGE 21 OF 26 FOR LINE 24 OF FORM 3X				
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼				
Constitutional Conservatives							
			C C00620120				
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on				
Full Name of Payee		✗ Memo	Item Date of Public Distribution/Dissemination				
Global Striké			08 22 2016				
Mailing Address 224 Daturo Street			Amount				
Suite 401							
City	State	Zip Code	1500.00 Transaction ID : SE.4302				
West Palm Beach	FL	33401	Date of Disbursement or Obligation				
Purpose of Expenditure Media Placement		Category/ Type 004	08 / 08 / 22 / 2016				
Name of Federal Candidate:		Support	Office Sought: House District: 19				
GOSS, CHAUNCEY, P, ,		X Oppose	President Senate State: FL				
Calendar Year-To-Date Per Election for Office Sought	7 7	196152.50	Disbursement For: Primary General 2016 Other (specify) ▶				
Full Name of Payee		✗ Memo	Item Date of Public Distribution/Dissemination				
Global Strike			08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Mailing Address 224 Daturo Street							
Suite 401			Amount				
City	State	Zip Code	4908.75				
West Palm Beach	FL	33401	Transaction ID : SE.4306 Date of Disbursement or Obligation				
Purpose of Expenditure Media Placement		Category/ Type 004	08 / D2D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Name of Federal Candidate:		Support	Office Sought: House District: 19				
Bongino, Daniel, , ,		x Oppose	President Senate State: FL				
Calendar Year-To-Date		201061.25	Disbursement For: Primary General				
Per Election for Office Sought	7-1-1-5-	201001.25	2016 ☐ Other (specify) ▶				
(a) SUBTOTAL of Itemized Independent Expenditures							
(a) TOTAL Independent Expenditures			•				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.							
Satterfield, David, , ,	Electronically Fil	adl	M = M / D = D / Y = Y = Y				
Signature	<u> Баси опишну Г</u> П	Date	9 10 14 2016				

Signature

SCHEDULE E (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITURES				PAGE 22 OF 26				
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X				
Constitutional Conservatives		FEC IDENTIFICATION NUMBER ▼						
				C C00620120				
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	M / D D / Y Y Y Y				
Full Name of Payee	of Public Distribution/Dissemination							
Global Strike	M	08 / 22 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
Mailing Address 224 Daturo Street								
Suite 401			Amour					
City	State	Zip Code		4908.75				
West Palm Beach	FL	33401		action ID : SE.4309 of Disbursement or Obligation				
Purpose of Expenditure Media Placement		Category/ Type 004	M	08 22 7 2016				
Name of Federal Candidate:		Support	Office Sough	t: Nouse District: 19				
GOSS, CHAUNCEY, P, ,		X Oppose	Preside					
Calendar Year-To-Date			Disbursemen					
Per Election for Office Sought		205970.00	2016	ther (specify) ▶				
Full Name of Payee Global Strike	Full Name of Payee Global Strike							
Mailing Address 224 Daturo Street Suite 401			Amour	nt				
City	State	Zip Code	ΗГ:	2500.00				
West Palm Beach	FL	33401	Trans	saction ID : SE.4315 of Disbursement or Obligation				
Purpose of Expenditure Voter Telephone Communication		Category/ Type 004	N	08 / 24 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Name of Federal Candidate:		Support	Office Sough	t: X House District:19				
Bongino, Daniel, , ,		x Oppose	Preside	ent Senate State: FL				
Calendar Year-To-Date Per Election for Office Sought	A A	209128.58	Disbursemen					
(a) SUBTOTAL of Itemized Independent Expenditures								
Under penalty of perjury I certify that the independer with, or at the request or suggestion of, any candidat party committee) any political party committee or its a	te or authorized							
Satterfield, David, , , [Electronically Fil	ed] Date	M = M /	14 2016				
Cianaturo		_ Date	التنا					

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

TEMIZED INDEPENDENT EXPENDITURES				PAGE 23 OF 26 FOR LINE 24 OF FORM 3X			
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼			
Constitutional Conservatives		C C00620120					
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M M M / D D / Y M Y M Y M Y			
Full Name of Payee Global Strike		✗ Memo	Item Da	te of Public Distribution/Dissemination			
M :::		08					
Mailing Address 224 Daturo Street			Am	nount			
Suite 401	Ctata	Zin Codo	— г	2500.00			
City West Palm Beach	State FL	Zip Code 33401	Tra	ansaction ID : SE.4316			
Purpose of Expenditure			Da	te of Disbursement or Obligation			
Voter Telephone Communication		Category/ Type 004		08 / 24 / 2016			
Name of Federal Candidate:		Support	Office So	ught: House District: 19			
GOSS, CHAUNCEY, P, ,		x Oppose	Pre	sident Senate State: FL			
Calendar Year-To-Date		211628.58	Disburser	ment For: 🗶 Primary General			
Per Election for Office Sought	7 1 7	211020.30	2016	Other (specify) ▶			
Full Name of Payee Gridiron Communications							
Mailing Address 3903 Portage Rd				08 24 2016			
Suite C #262			An	nount			
City	State	Zip Code		658.58			
South Bend	IN	46628	I .	te of Disbursement or Obligation			
Purpose of Expenditure Voter List		Category/ Type 004		08 / 24 / 2016			
Name of Federal Candidate:		Support	Office So	ught:			
GOSS, CHAUNCEY, P, ,		x Oppose	l —	sident Senate State: FL			
Calendar Year-To-Date Per Election for Office Sought		206628.58	Disburser				
,	1			Other (specify) ▶			
(a) SUBTOTAL of Itemized Independent Expenditures				658.58			
			· <u>-</u>				
(a) SUBTOTAL of Unitemized Independent Expenditures							
(a) TOTAL Independent Expenditures			•	, ,			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.							
Satterfield, David, , ,	Electronically Fil	led1 -	M = M	/ D D / Y Y Y Y			
Signature		Date	10	14 2016			

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

TEMIZED INDEPENDENT EXPENDITURES				PAGE 24 OF 26 FOR LINE 24 OF FORM 3X			
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼			
Constitutional Conservatives				C C00620120			
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y			
Full Name of Payee Sun Broadcasting Inc		☐ Memo	Item Da	ate of Public Distribution/Dissemination			
Mailing Address 2824 Palm Beach			Δn	08 29 2016			
		1					
City	State	Zip Code 33916		4908.75 ansaction ID : SE.4245			
Fort Myers	FL	33916		ate of Disbursement or Obligation			
Purpose of Expenditure Media Placement		Category/ Type 004	1	08 / 29 / 2016			
Name of Federal Candidate:		Support	Office Sc	ought: X House District: 19			
Bongino, Daniel, , ,		x Oppose	Pre	esident Senate State: FL			
Calendar Year-To-Date Per Election for Office Sought	<i>A</i> <i>A</i>	216537.33	Disbursei 2016	ment For: Primary General Other (energity)			
Full Name of Payee	,	□ Momo	Itom Da	Other (specify) ▶ate of Public Distribution/Dissemination			
Sun Broadcasting Inc		∐ Memo	item De	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address 2824 Palm Beach			An	nount			
City	State	Zip Code	— г	4908.75			
Fort Myers	FL	33916		ransaction ID : SE.4247 ate of Disbursement or Obligation			
Purpose of Expenditure Media Placement		Category/ Type 004		08 / DDD / YYYYY Y 2016			
Name of Federal Candidate:		Support	Office Sc	ought: House District: 19			
GOSS, CHAUNCEY, P, ,		x Oppose	Pre	esident Senate State: FL			
Calendar Year-To-Date Per Election for Office Sought	7 1 7	221446.08	Disburser 2016	ment For: Primary General Other (specify) ▶			
(a) SUBTOTAL of Itemized Independent Expenditures				9817.50			
(a) SUBTOTAL of Unitemized Independent Expenditures							
(a) TOTAL Independent Expenditures			•	7 7			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.							
Satterfield, David, , ,	Electronically Fil	led1	M = M	/ D D / Y Y Y Y			
Signature	z.con omeuny I'u	_ Date	e 10	14 2016			

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

TEMIZED INDEPENDENT EXPENDITURES				PAGE 25 OF 26			
NAME OF COMMITTEE (In Full)			EE	FOR LINE 24 OF FORM 3X C IDENTIFICATION NUMBER ▼			
Constitutional Conservatives C C00620120							
				C00020120			
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	/ D D / Y Y Y Y			
Full Name of Payee		✗ Memo	Item Date of P	ublic Distribution/Dissemination			
The Herald Group			M 08	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address 1800 M Street NW			Amount				
City	State	Zip Code		15000.00			
Washington	DC	20036		ion ID : SE.4278 bisbursement or Obligation			
Purpose of Expenditure Media Placement		Category/ Type 004	M = 1				
Name of Federal Candidate:		Support	Office Sought:	➤ House District: 19			
Bongino, Daniel, , ,		X Oppose	President	Senate State: FL			
Calendar Year-To-Date Per Election for Office Sought	7 1 7	70032.50	Disbursement For 2016 Other	or: 🗶 Primary General r (specify) ▶			
Full Name of Payee		✗ Memo	Item Date of P	ublic Distribution/Dissemination			
The Herald Group			M 08	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address 1800 M Street NW							
			Amount				
City	State	Zip Code		15000.00			
Washington	DC	20036		tion ID : SE.4284 Disbursement or Obligation			
Purpose of Expenditure Media Placement		Category/ 004	M 18	W / D D / Y Y Y			
Modal Flassinsin		Type 004		12 2010			
Name of Federal Candidate:		Support	Office Sought:	House District:19			
GOSS, CHAUNCEY, P, ,		x Oppose	President	Senate State: FL			
Calendar Year-To-Date		85032.50	Disbursement Fo	or: 🗶 Primary General			
Per Election for Office Sought	7 7		Othe	r (specify) ►			
(a) SUBTOTAL of Itemized Independent Expenditures							
(a) SUBTOTAL of Unitemized Independent Expenditures							
(a) TOTAL Independent Expenditures			•	7			
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidaparty committee) any political party committee or its	ate or authorized						
Satterfield, David, , ,	[Electronically Fil	led]	M = M / D	D / Y Y Y Y Y Y			
Signature	при применти при применения приме	_ Date	10 1	2016			

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ Constitutional Conservatives C00620120 Check if 24-hour report 48-hour report Amends report filed on New report Date of Public Distribution/Dissemination Full Name of Payee X Memo Item The Herald Group 15 2016 Mailing Address 1800 M Street NW Amount State Zip Code 5000.00 City DC 20036 Transaction ID: SE.4293 Washington Date of Disbursement or Obligation Purpose of Expenditure Category/ Media Placement 004 08 15 2016 Type Name of Federal Candidate: 19 Support Office Sought: **X** House District: Bongino, Daniel, , , FL Oppose President Senate State: Disbursement For: x Primary General Calendar Year-To-Date 158652.50 2016 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Memo Item The Traz Group 2016 29 08 Mailing Address 18 Pendleton Court Amount 19149.67 City State Zip Code Transaction ID: SE.4248 Medford NJ 08055 Date of Disbursement or Obligation Purpose of Expenditure Category/ Voter Outreach 004 2016 08 Type Name of Federal Candidate: 19 Support Office Sought: **X** House District: GOSS, CHAUNCEY, P,, FL Oppose President Senate State: **✗** Primary Disbursement For: General Calendar Year-To-Date 240595.75 2016 Per Election for Office Sought Other (specify) ▶ (a) SUBTOTAL of Itemized Independent Expenditures 19149.67 (a) SUBTOTAL of Unitemized Independent Expenditures..... (a) TOTAL Independent Expenditures 122245.75 Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Satterfield, David, , , [Electronically Filed] 14 2016 Date Signature

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